



Uniform Plan 2A

Physician Services/Basic Health Services

Consultation, diagnosis, and treatment

Primary Care Physician \$10 copayment per office visit. Specialist \$20 copayment per office visit.

Annual Physical Examination

Includes pap smears \$10 primary care physician/\$20 specialist copayment per

office visit.

\$20 copayment

Immunizations

Flu shots, pneumococcal vaccine, and Hepatitis B injections

Covered in full

All other Medicare approved immunizations

Covered in full

Hospitalization \$250 copayment per admission *

Non-network/ Out of Area Urgent Care \$25 copayment

Ambulance Services \$50 copayment

Medically necessary ambulance transport

Outpatient Surgical Services

Certified Ambulatory Surgical Center \$125 copayment
Outpatient Hospital Facility \$125 copayment

Outpatient Mental Health Care/Outpatient

Substance Abuse Treatment

Inpatient Psychiatric Care/Inpatient \$250 copayment per admission up to 190 days lifetime Substance Abuse Treatment \$250 copayment per admission up to 190 days lifetime maximum in a psychiatric hospital.

Emergency ServicesCovered Worldwide

You may go to any emergency room if you \$50 copayment, waived if admitted to hospital within 24

reasonably believe you need emergency care hours for the same condition.

Prescription DrugsSee Uniform RX Plans

Selected Medications

Covered Outpatient Injectables Covered in full

Insulin Brand copayment per prescription unit.

Medicare-covered Immunosuppressive Drugs Covered in full Medicare-covered Oral Chemotherapy Drugs Covered in full

Renal Dialysis Covered in full





Uniform Plan 2A

Radiation Therapy

Routine Covered in full Complex Covered in full

Skilled Nursing Facility

In a Medicare-Certified skilled nursing facility

\$0 Days 1-20, \$50/day Days 21-100. Limit 100 days per

benefit period ** as defined by Medicare

Vision Care

Examination for eyeglasses (Refraction) \$10 primary care physician/\$20 specialist copayment per

office visit.

Hearing Services

Routine Hearing Examination \$10 primary care physician/\$20 specialist copayment per

office visit.

Chiropractic Services

Medicare Benefit ONLY

\$10 primary care physician/\$20 specialist copayment per

office visit.

For Secure Horizons Medicare+Choice Plan Sales Call: 1-800-610-2660, or for the Hearing Impaired – 1-800-387-1074, weekdays 6:00 a.m. – 6:00 p.m. PST

- * Inpatient Hospital Copayments are charged on a per admission basis. **Original Medicare hospital benefit periods do not apply.** For Inpatient Hospital, you are covered for an unlimited number of days as long as the hospital stay is medically necessary and authorized by PacifiCare or contracting providers. When you are admitted to an Inpatient Hospital and then subsequently transferred to another Inpatient Hospital, you pay the copayment charged for the first hospital admission. You do not pay a copayment for the second hospital admission; the copayment is waived.
- ** A benefit period begins the day you go to a hospital or skilled nursing facility. The benefit period ends when you haven't received hospital or skilled care (in a SNF) for 60 days in a row. If you go into the hospital after one benefit period has ended, a new benefit period begins. You must pay inpatient hospital deductible for each benefit period. There is no limit to the number of benefit periods you can have.

This is a highlight of benefits only and is not all inclusive of the Plans benefits, services, limitations or exclusions. Please refer to the enclosed Retiree Benefits Summary and your Evidence of Coverage for details.

Secure Horizons Medicare+Choice Plans are offered by PacifiCare that contracts with the federal government. Anyone with Medicare Parts A and B may apply. Members must continue to pay Medicare premiums and use contracting pharmacies and providers for routine care. Limitations, copayments and coinsurance will apply. All members must meet the eligibility requirements to enroll for group coverage. Health plan premiums may vary by employer group. Pharmacy benefits are limited to a formulary that is subject to change without notice during the contract year. Contact Secure Horizons for additional details.